

DATE OPENED P/S: 1/20/95

6473

LAST NAME: Hickey

FIRST NAME: Tom Ed

STREET: 244 Box 338A CITY: Rockwood STATE: TN ZIP: 37854

HOME PHONE: 615 354 2088 WORK PHONE: _____ A.S. REPAIR: 94 36501

DATE OPENED REM: _____ DATE OF INCIDENT: _____ DATE CLOSED: 1/20

MFD. BY: Ram CALIBER: 30-06 MODEL: 700

SERIAL 6797858 RAMAC: _____ DATE CODE: EX DATE MFD: 10/74

____ OBSOLETE? X BULLET WEIGHT: _____

PRODUCT TYPE: F A T O (Circle one) TYPE CONCERN: PI PD R S C P/S

CONCERN CODE: 1008 CUSTOMER'S CONCERN: FBC

PROBLEM CODE: _____ PROBLEM: _____

CAUSE CODE: 4015 CAUSE: IM

DATE TO ANALYSIS: _____ CUSTODY: _____ DATE FROM ANALYSIS _____

ASSIGNED TO: [Signature] CLASSIFICATION: UNI UNC UND J

PRELITIGATION: X (If yes, circle the x) LITIGATION: X (If yes, circle the X)

SETTLEMENT DETAIL: Repair spec price

SETTLEMENT AMOUNT: _____

CUSTOMER CONCERN: FBC

COMMENTS: Gumming - tag & scan

ATTITUDE: IRATE----- ANGRY----- CALM----- PLEASED-----